

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO | DATE     |
|---------------------------|----------|-------|----------|
| FEE DETERMINATION         | J        |       | 05/16/01 |
| O.I.P.E. CLASSIFIER       |          | 20    | 6/1/01   |
| FORMALITY REVIEW          | H.L      | 1079  | 07/10/01 |
| RESPONSE FORMALITY REVIEW |          |       |          |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim    | Date |
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If more than 150 claims or 10 actions  
 staple additional sheet here

Best Available Copy

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